

monument sign must be on different applications.)

FOR OFFICE USE ONLY	
Application #:	
Date Entered:	

PROJECT ADDRESS:			
	_DOES NOT lie within the authocopy of notification letter sent to elow will certify that no HOA/Po	the HOA/POA	
TENANT NAME:			
OWNER:			
OWNER:COMPLETE MAILING ADDRE	ESS CITY/STATE	ZIP	PHONE
SIGN CONTRACTOR:			
ADDRESS	CITY/STATE	ZIP	PHONE
3 SETS OF PLANS ARE	REQUIRED		
TYPE OF SIGN: (Please check one	) Monument/Free Standing S	Sign □ Wa	all Sign □
Sign Submittals Must Include: Bas Wall signs must include actual wall An electrical disconnect per article	dimensions of the wall the sign	n is located on.	•
	SIGN VALUAT	ION: \$	
(FEES: \$25 Base Fee, Plus \$15 for A	First \$1,000 of sign evaluation,	Plus \$5.50 for	Each Additional \$1,000)
Wind Device/Banner Permit □ (\$25 <b>Description:</b>	•		
(Wind Device/Banner Permits Require	re: Applicants Driver License #	#	State Issued)

## **NOTICE**

\*Please note each type of sign requires a separate application (example: wall signs can be combined for same address and each

Separate permits are required for all building and sign construction. Except for wind devices, this sign permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced. For wind devices, this sign permit becomes null and void 28 days after issuance.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

## \*\*THE FOLLOWING CONTACT INFORMATION MUST BE FILLED OUT\*\*

Signature Of Owner	er or Authorized Agent	Date	Printed Name	Company
Street Address		City	State	Zip Code
Phone	Fax	Cell	Email	
		FOR OFFICE	USE ONLY	
APPROVALS ZONING VARIFIED BY:		AP	PROVED FOR ISSUANCE BY:	

rocessed by:	(Date)
Fo	or office use
<ul> <li>Image of sign with sign dime</li> </ul>	nsions
Site plan of survey showing 6	exact location of sign on property
MONUMENT SIGN	
<ul> <li>Total height of <u>sign</u></li> </ul>	
	is being attached to
	n is being attached to
WALL SIGN	
******TO BE FILI	LED OUT BY CONTRACTOR*******
PHONE, & INFORMATI	ION PROVIDE D IS LEGIBLE)
	ED APPLICATIONS ATTACHED ((FAX, EMAIL,
LEGIBLE)	<del>_</del>
INFORMATION (FAX, E	EMAIL, PHONE, & INFORMATION PROVIDED
o APPLICATION IS CURR	RENT AND CONTAINS ALL CONTACT
o 3 COPIES OF PLANS SU	
PLEASE VERIFY THE FOLLOWING	INFORMATION BY PLACING A CHECK MARK BY EACH ITEM.

<sup>\*\*</sup>Any submittals that do not meet all the requirements on the checklist should not be accepted. If plans are received by the DRC Coordinators with missing information they will be sent back downstairs.\*\*